

Certification

Bridgewater-Raritan Supervisors' Association


I declare to the best of my knowledge and belief that the attached document(s) are true electronic copies of the executed collective negotiations agreement(s) and the included summary is an accurate assessment of the collective bargaining agreement for the term beginning 7/1/2016 thru 6/30/2019.

Employer: Bridgewater-Raritan Regional School District

County: Somerset

Date: 11/30/2017

Name: Peter F. Starrs
Print Name

Title: Business Administrator/Board Secretary

Signature

SUMMARY FORM

COLLECTIVE BARGAINING AGREEMENT PUBLIC SECTOR / NON-POLICE & NON-FIRE

Section I: Agreement Details

Public Employer: Bridgewater-Raritan Regional School District County: Somerset
Employee Organization: Bridgewater-Raritan Supervisors' Association Employees in Unit: 19
Base Year Contract Term: 7/1/2013 6/30/2016 New Contract Term 7/1/2016 6/30/2019
Type of Settlement: ☒ Mediated Settlement ☐ Fact-Finder Recommendation ☐ Voluntary Settlement ☐ Super Conciliation

		Column A Base Year - Total Costs (Last Year of Previous agreement)	Column B New Base Year - Total Costs (First Year of Successor agreement)
Section II: Economic			
Item 1	Salary	\$2,009,641	\$2,056,868
Item 2	Increment		
Item 3	Longevity	\$12,753	\$12,753
Item 4			
Item 5			
Item 6			
Item 7			
Item 8			
Item 9			
Item 10			
Item 11			
Item 12			
Any additional items list on separate sheet Additional Items			
Section III: Totals - Sum of costs in each column		\$2,022,394 (Total)	\$2,069,621 (Total)

Section IV: Analysis of new successor agreement

NEW AGREEMENT ANALYSIS

Total Base Year (previous agreement) \$2,022,394

Effective Date (m/d/yyyy)	7/1/2016	7/1/2017	7/1/2018			
Percent Increase	2.35%	2.35%	2.35%			
Total cost of increase ..	\$47,226	\$48,336	\$49,673			
Total base salary (successor agreement)	\$2,069,621	\$2,122,263	\$2,171,836			

Section V: Impact of Settlement - average annual increase over term of agreement

Percentage Impact (average per year over term of agreement) 2.35
Dollar Impact (average per year over term of agreement) \$48,378.00

Section VI

Health Insurance (indicate costs associated on each line)

	Base Year	Year 1				
Cost of Health Plan .. (all incl.)	\$334,552	\$374,698				
Employee Contributions	\$89,865	\$100,648				
Prescription						
Dental						
Vision						

The undersigned certifies that the foregoing figures are true and is aware that if any of the foregoing items are false, s/he is subject to punishment.

Section VII

Prepared by:

Peter Starrs

Title: Business Administrator

Print Name

Date: 11/30/2017

Signature